

PTO/SB/01 (03-01)

Approved for use through 10/31/2002. OMB 0851-0032

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted with Initial Filing

OR

Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number **FUT-01**First Named Inventor **Perge****COMPLETE IF KNOWN**Application Number **/**Filing Date **July 13, 2001**

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SYSTEM AND METHOD FOR MATCHING BUSINESS PARTNERS

(Title of the Invention)

the specification of which

 is attached hereto

OR

 was filed on (MM/DD/YYYY) **[Redacted]**

as United States Application Number or PCT International

Application Number **[Redacted]**and was amended on (MM/DD/YYYY) **[Redacted]**

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 385(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?
			<input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>

 Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

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PTO/SB/01 (03-01)

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Number
 or Bar Code Label OR Correspondence address below

Name William J. Kolegraff

Address 3119 Turnberry Way

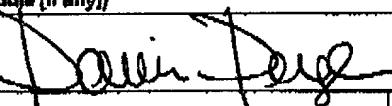
City Jamul	State CA	ZIP 91935
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Country US	Telephone 619 / 401 - 8008	Fax
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR : A petition has been filed for this unsigned inventor

Given Name Damir (first and middle [if any])	Family Name Perge or Surname
---	---

Inventor's Signature 	Date 7/13/01
---	---------------------

Residence: City Saratoga	State CA	Country US	Citizenship US
---------------------------------	-----------------	-------------------	-----------------------

Mailing Address 21224 Saratoga Hills Road

City Saratoga	State CA	ZIP 95070	Country US
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NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor

Given Name Lonnie J. (first and middle [if any])	Family Name Eldridge or Surname
---	--

Inventor's Signature	Date
-----------------------------	-------------

Residence: City San Mateo	State CA	Country US	Citizenship US
----------------------------------	-----------------	-------------------	-----------------------

Mailing Address 1300 Palos Verdes Drive #9

City San Mateo	State CA	ZIP 94403	Country US
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Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

PTO/SB/01 (03-01)

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DECLARATION — Utility or Design Patent Application

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Name William J. Kolcgraff

Address 3119 Turnberry Way

City Jamul	State CA	ZIP 91935
Country US	Telephone 619 / 401 - 8008	Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor

Given Name Damir (first and middle [if any])	Family Name Perge or Surname
--	--

Inventor's Signature	Date
-----------------------------	------

Residence: City Saratoga	State CA	Country US	Citizenship US
---------------------------------	-----------------	-------------------	-----------------------

21224 Saratoga Hills Road

Mailing Address

City Saratoga	State CA	ZIP 95070	Country US
----------------------	-----------------	------------------	-------------------

NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor

Given Name Lonnie J. (first and middle [if any])	Family Name Eldridge or Surname
--	---

Inventor's Signature <i>Lonnie J. Eldridge</i>	Date <i>July 13, 2001</i>
---	---------------------------

Residence: City San Mateo	State CA	Country US	Citizenship US
----------------------------------	-----------------	-------------------	-----------------------

1300 Palos Verdes Drive #9

Mailing Address

City San Matco	State CA	ZIP 94403	Country US
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Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

Please type a plus sign (+) inside this box → +

PTO/SB/61 (02-01)

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	July 13, 2001
First Named Inventor	PERGE
Title	System and Method for Matching Business Partners
Group Art Unit	
Examiner Name	
Attorney Docket Number	FUT-01

I hereby appoint:

- Practitioners at Customer Number _____
OR
 Practitioner(s) named below:

→ **Place Customer
Number Bar Code
Label here**

Name	Registration Number
William J. Kolegraff	41,125

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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OR
 Practitioners at Customer Number _____
OR

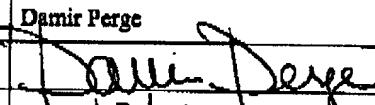
→ **Place Customer
Number Bar Code
Label here**

<input checked="" type="checkbox"/> Firm or Individual Name	William J. Kolegraff			
Address	3119 Turnberry Way			
Address				
City	Jamul	State	CA	Zip 91935
Country	US			
Telephone	619 / 401 - 8008	Fax		

I am the:

- Applicant/Inventor.
 Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Damir Perge
Signature	
Date	17/13/01

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of 2 forms are submitted.

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PTO/SB/81 (02-01)

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	July 13, 2001
First Named Inventor	PERGE
Title	System and Method for Matching Business Partners
Group Art Unit	
Examiner Name	
Attorney Docket Number	FUT-01

I hereby appoint:

 Practitioners at Customer Number

Place Customer
Number Bar Code
Label here

OR

 Practitioner(s) named below:

Name	Registration Number
William J. Kolegraff	41,125

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

 The above-mentioned Customer Number.

OR

 Practitioners at Customer Number

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Number Bar Code
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OR

 Firm or Individual Name

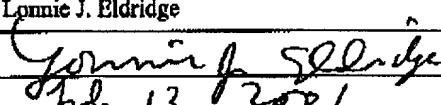
William J. Kolegraff

Address	3119 Tumberry Way			
Address				
City	Jamul			
Country	US			
Telephone	619 / 401 - 8008		Fax	

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Lonnice J. Eldridge
Signature	
Date	July 13 2001

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

 *Total of 2 forms are submitted.

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